

PROPOSAL FORM FOR MOTOR VEHICLE INSURANCE

Proposer details:

Full name of Proposer 投保人姓名	Date of Birth (DD/MM/YYYY) 出生日期	Driving Experience 駕駛年資	Address 地址
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
HKID No./ Business Reg. No. 香港身份證號碼/商業登記號碼	Occupation/Business Nature 行業	Mobile 聯絡電話	Email 電郵
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Type of Cover

<input type="checkbox"/> Comprehensive 綜合保	<input type="checkbox"/> Comprehensive with Own Damage extension in Guangdong Province (綜合保及附加廣東省內汽車自身損毀)	<input type="checkbox"/> Third party only 第三者責任保	1 year policy to commence 保單生效日期由	DD MM YYYY From <input type="text"/>
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Car Details

Car Details (Please submit the copy of Vehicle Registration Document) 投保汽車資料 (請附上車輛登記文件副本)

● Registration No. 車牌號碼	<input type="text"/>	● Chassis No. 底盤號碼	<input type="text"/>
● Make and Model 製造廠及類型	<input type="text"/>	● Cubic Capacity/汽缸容量	<input type="text"/>
● Year of Manufacture 製造年份	<input type="text"/>	Gross Vehicle Weight/車輛總重	<input type="text"/>
● Engine No. 引擎號碼	<input type="text"/>	● Seating capacity (including driver) 座位數目(連司機計算)	<input type="text"/>
		● Estimated Value including accessories 市價連附件	HK\$ <input type="text"/>

Named Driver details

Name of drivers(including the insured) 駕駛者姓名,包括投保者在內	Occupation/Position 行業/職位	Driving License No. 駕駛執照號碼	Date of Birth DD/MM/YYYY 出生日期	Driving Experience 駕駛年資
01				
02				
03				
04				

No Claim Discount

Are You entitled to a "No Claim Discount (NCD) from previous Insurers?
 投保者是否享有"無賠償折扣" Yes 是 No 否

Name of Insurer 保險公司名稱	Present Policy Number 有效保單號碼	Registration Mark 車輛登記號碼	NCD (%) 無賠償記錄折扣 (%)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Questions

Q1 – Please state the use of vehicle:
 請說明投保汽車用途
 For Social, domestic and pleasure purpose
 社交,家用與享樂用途 For business professional use of for use by employees
 商業用途 Others, Please specify其他, 請詳述 _____

Q2 – Will passengers or goods be carried for hire, reward or ride-sharing services (including Uber or similar services)? 投保汽車有否接載乘客或貨物而作租用/牟利用途或共乘服務(例如優步(Uber)或其他同類服務)?
 Yes 是 No 否 If Yes, Please give details 如有 請詳述 _____

Q3 – Has the vehicle been modified in any way? 投保汽車有否曾作出任何形式的改裝或修飾?
 Yes 是 No 否 If Yes, Please give details 如有 請詳述 _____

Q4 – Have you or the above named driver(s) been declined, refused to renew or cancelled the motor vehicle insurance by any insurers? 投保者或以上記名駕駛者有否被任何保險公司拒絕投保、到期不允續保或取消保單?
 Yes 是 No 否 If Yes, Please give details 如有 請詳述 _____

Q5 – Have you or any person who to your knowledge will drive been convicted or disqualified or accumulated more than 12 driving offence points during the past 3 years of any offence in connection with the driving of any motor vehicle? 投保者或任何經常駕駛者於三年內有否被法庭因駕駛過事被罰,吊銷執照或記錄違例駕駛分數超過十二分?
 Yes 是 No 否 If Yes, Please give details 如有 請詳述 _____

Q6 – Have you or the above named driver(s) ever been involved in any motor accident and/or made a claim under any Motor Vehicle Policy during the past 3 years? 投保者或以上記名駕駛者於三年內有否交通意外或要求賠償?
 Yes 是 No 否 If Yes, Please give details 如有 請詳述 _____

Q7 – Is the vehicle under a hire purchase agreement? If Yes, please give details.
 投保汽車是否用分期付款方式購入
 Yes 是 No 否 If Yes, Please give details 如有 請詳述 _____

Q8 – Do you agree to receive a copy of policy terms & conditions (except Schedule & Certificate of Insurance) by electronic mail instead of postal mail?
 你是否願意接受保單條款(除保單內容及保險證書)以電子郵件取代郵寄?
 Yes 是 No 否

Personal Information Collection and Use Statement

Allianz Global Corporate & Specialty SE Hong Kong Branch ("we" or "us") may use the personal data we collect about you for the following purposes:

- processing and evaluating your insurance application and any future insurance application you may make;
- administering your insurance policy and providing services in relation to your insurance policy;
- investigating, processing and paying claims made under your insurance policy;
- invoicing and collecting premiums and outstanding amounts from you;
- reinsurance purposes;
- statistical research, data matching and/or verification purposes;
- contacting you for any of the above purposes;
- other ancillary purposes which are directly related to the above purposes; and
- complying with applicable laws, regulations or any industry codes or guidelines or requests.

Such personal data may be disclosed, shared, divulged, supplied or otherwise transferred, within or outside Hong Kong, to:

- any of our related or associated companies, third party service providers, intermediaries, professional advisers and/or vendors in relation to any of the aforesaid purposes; and
- any association, federation or similar organization of insurance companies and/or other business participants in the insurance industry ("Federation") that exists or is formed from time to time for the benefit and interest of the insurance industry or any members thereof or for regulating the insurance companies or other business participants or any other individual/organization/third party as we may consider necessary or desirable in our discretion; and
- any regulator or government body or authority.

If you do not agree to the provision of the personal data requested on the form or the use of such data for the above purposes, we may not be able to process your application.

Direct Marketing

With your consent, we may

- use your personal information, including your name, contact details, products and services portfolio information, demographics data and/ or policy details, held by us from time to time for direct marketing;
- conduct direct marketing in related to insurance, financial services or other related products and services provided by us, our affiliates, our co-branding partners, our business partners and/or our intermediaries; and/or
- provide the data described in 1 above to all or any of the persons described in 2 above for use by them in marketing those products and services.

Before using your personal information as set out in Direct Marketing statement above, we must obtain your consent.

I/We do not agree with the use and provision of my/our personal data for direct marketing purposes as set out above in the Personal Information Collection Statement and do not wish to receive any promotional and direct marketing materials.

You may in future withdraw your consent to the use and provision of your personal data for Direct Marketing or your consent to the Personal Information Collection Statement by contacting our Data Privacy Officer.

You may seek access to and request correction of any personal data we hold about you by contacting our Data Privacy Officer at Suites 403-11, 4/F, Cityplaza Four, 12 Taikoo, Wan Road, Taikoo Shing, Island East, Hong Kong

Declaration

I/We declare that:

- All information and answers provided in this proposal form, which shall form the basis and become part of any insurance contract issued hereunder, are complete and true.
- To the best of my/our knowledge and belief, any facts that may affect acceptance or assessment of the insurance cover have been disclosed hereunder, and I/we understand and agree that any failure to disclose such information may affect the insurance cover requested or invalidate the policy altogether.
- I/We have read and agreed to all of the declarations, policy wording and Personal Information Collection Statement.

Date 日期 : Day/Month/Year

Authorized Agent - 特許代理

收集個人資料的聲明

安聯環球企業及專項保險香港分公司（「我們」）可就我們收集有關您的個人資料作以下用途：

- 處理及評估您的保險申請及您未來作出之任何保險申請；
- 辦理保單文件及提供有關您保單之服務；
- 調查、處理及償付您保單之索償；
- 處理發票及向您收取保費及未付之費用；
- 再保用途；
- 統計研究、資料配對及/或調查之用；
- 就以上任何用途與您聯絡；
- 其他與以上用途直接有關之輔助用途；及
- 符合適用之法例、規則或任何業內守則或指引或要求。

這些個人資料可披露、分享、透露、提供或轉移至香港境內或境外的：

- 任何與上述目的有關的相關或相關聯公司、第三方服務供應商、代理、專業顧問和/或供應商；及
- 任何保險業協會、聯會、保險公司及/或業務參與者為業界利益不時成立的組織（「聯會」），任何為了規範保險公司或其他業務參與者的成員或任何我們認為必須的個人/組織/第三方；及
- 任何監管機構，政府或官方機構。

如果您不同意為了上述目的而提供表格上要求的個人資料，我們將無法處理您的申請。

直接促銷

在您同意下，我們可

- 使用我們不時持有的個人資料，包括您的姓名、聯絡資料、產品及服務組合資料、人口統計數據及/或保單資料作直接促銷
- 就我們、我們的關聯公司、品牌合作夥伴、業務夥伴及/或代理提供的保險、金融服務或其他相關產品和服務而進行直接促銷；及/或
- 將1)所述的資料提供予2)所述的全部或任何人士，以供他們在促銷產品及服務之用。

使用您的個人資料作上述直接促銷用途前，我們必須獲得您的同意。

本人/我們不同意貴公司根據“收集個人資料的聲明”使用和轉移本人/我們的個人資料作直接促銷用途及並不願意接收任何貴公司的推廣及直接促銷的材料。

您日後可撤回您給予我們有關使用您的個人資料作直接促銷或收集個人資料的允許，如您欲撤回有關同意，請聯絡我們的資料保護主任。

要查閱及更正我們所持有您的任何個人資料，可投寄至香港港島東太古城·太古灣道12號太古城中心四座4樓，403-11室，與我們的資料保護主任聯絡。

聲明

本人/吾等聲明：

本投保書內所載問題的資料及答覆，均為全部正確無訛，而此等資料及答覆均會成為項下保險合約的基礎及其部份。

- 在本人/吾等盡所知所信範圍內，已提供所有有關會影響接納或釐定此保單保障條文的重要事實，而本人/吾等明白並同意若未能提供此等資料，將可能影響所需保障的提供，或導致此保單無效。
- 本人/吾等已細閱並同意所有聲明、保單條款及收集個人資料的聲明。

Signature / 簽署 _____
(with company chop for
corporate applicant)
(機構投保人請附上公司蓋章)